•								Application or Docket Number						
*PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001    10/02/753													5	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMAL TYPE	LEI	ALLIA —	OR	OTHER SMALL I		
TOTAL CLAIMS			62				1	RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	370.00	OR	Basic Fee	740.00	
TOTAL CHARGEABLE CLAIMS			62 minus 20=		· 42		1	X\$ 9	)=	J78-	OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		. 8			X42=			OR	X84=		
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT					+140=		2.1/3		+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2									AL	1001	OR OR	TOTAL		
CLAIMS AS AMENDED - PART II										1084	JOH	OTHER	THAN	
(Column 1)				(Column 2) (Column 3)				SMA	LL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RAT	E	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 62	Minus	- 6	,2	. —		X\$ 9	=		OR	X\$18=		
	Independent	- //	Minus	***	//	-		X42	=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140	)_			+280=		
									TAL		OR OR	TOTAL		
	(Column 1) (Column 2) (Column 3)								FEE		JOH	ADDIT. FEE		
AMENDMENT B		CLAIMS		HIGH	HEST		1			ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		PREV	ABER HOUSLY FOR	PRESENT EXTRA		RAT	Έ	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 89	Minus	** 8	9			X\$ 9	)=		OR	X\$18=	·	
	Independent	12	Minus	*** /	2		1	X42	=		OR	X84=		
	1 PRESE	ENTATION OF M	ULTIPLE DEF	ENDEN	CLAIM	les	J	+14	)=		ОЯ	+280=		
						SK 1100	m	TO ADDIT.	TAL		OR	TOTAL ADDIT. FEE		
0	2/2/16 (Column 1) (Column 2) (Column 3							ist.						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		) PREV	HEST MBEA MOUSLY FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· Don	Minus	**		<b>E</b>		X\$ 9	)=		OR	X\$18=		
	Independent	· 70	Minus	400		=		X42	=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.												+280= TOTAL		
~	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE													
		mber Previously Pa					er fo	und in t	е ар	propriate bo	ox in co	dumin 1.		

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